



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Laguna) Examiner: Bui, Vy Q.
Application No.: 10/071,635)
Filing Date: February 7, 2002)
Title: Apparatus And Methods For)
Conduits And Materials)

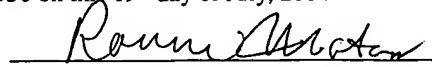
RESPONSE TO RESTRICTION REQUIREMENT
AND PRELIMINARY AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Restriction Requirement mailed on June 23, 2003 please amend the claims in accordance with the amendments starting on Page 2 of this paper and please consider the remarks which begin on Page 6 of this paper.

Certificate of Mailing: I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 19th day of July, 2004.


Ranni Matar

JUL 23 2004

PTO/SB/21 (04-04)

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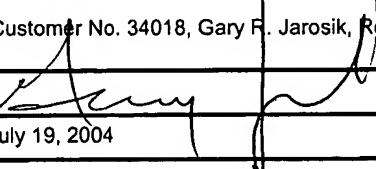
**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/071,635
Filing Date	02/07/2002
First Named Inventor	Alvaro Laguna
Art Unit	3731
Examiner Name	Bui, Vy Q.
Total Number of Pages in This Submission	7
	Attorney Docket Number
	44178.02US1

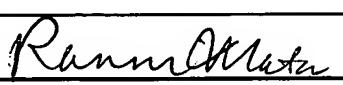
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Remarks</div> <div style="margin-top: 5px;">- return postcard</div>	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Customer No. 34018, Gary R. Jarosik, Reg. No. 35,906	
Signature		
Date	July 19, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Ranni Matar	
Signature		Date
	July 19, 2004	

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